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ABSTRACT

This report resulted from a project designed to involve people with disabilities in the development of employment policies and rehabilitation services. The report presents recommendations addressing employment preparation, placement, postemployment, and support systems. The project, titled "National Agenda for the Employment of People with Disabilities," involved major national advocacy groups and comprised three steps: (1) data collection regarding employment concerns; (2) translation of concerns into service and policy responses; and (3) development by advocacy organizations of organizational priorities and plans (agendas) responsive to the concerns and recommendations. Among the 20 recommendations are the following: train rehabilitation, educational, and medical professionals in client empowerment techniques; require that a specific vocational objective, including an occupational objective, be a part of the Individualized Education Plan; promote the recruitment of students with disabilities by colleges and universities; fund tax incentive programs for targeted recruitment programs and employment subsidies that benefit people with disabilities; support community-based placement programs that teach people how to manage and maintain their own job searches; improve disability management services offered by employers and employee assistance programs; and promote and communicate work or independence incentives in Social Security provisions. Includes 54 references. (DB)

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Employment Priorities for the '90s

For People With Disabilities

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President's Committee on Employment of People with Disabilities
Arkansas Research and Training Center in Vocational Rehabilitation

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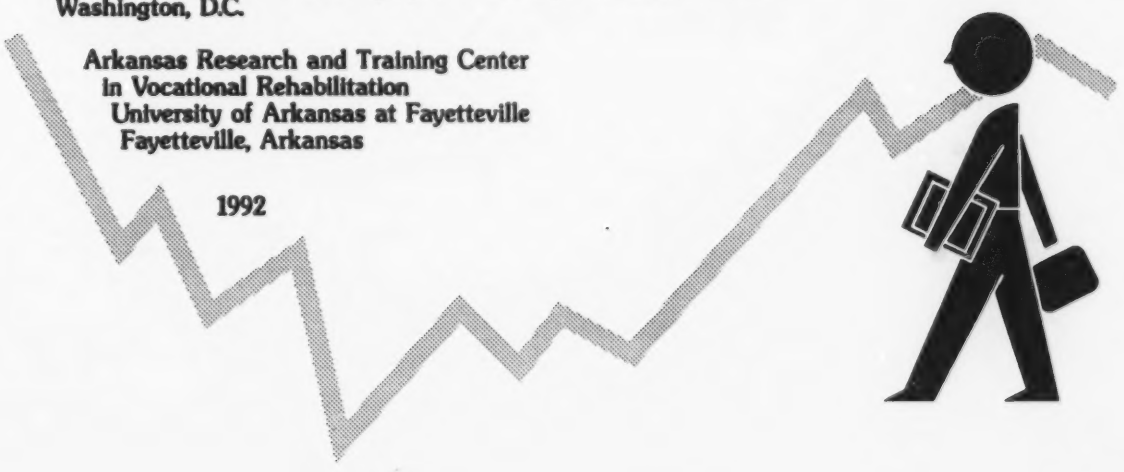
Employment Priorities for the '90s

For People With Disabilities

Employment Preparation Committee
President's Committee on Employment of People with Disabilities
Washington, D.C.

Arkansas Research and Training Center
in Vocational Rehabilitation
University of Arkansas at Fayetteville
Fayetteville, Arkansas

1992



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Foreword

The Employment Preparation Committee and the Arkansas Research and Training Center in Vocational Rehabilitation wish to acknowledge contributions of the organizations and people who participated in the study. Without their help, the Agenda project could not have been completed. The constituents and professional staff of the following associations and foundations deserve special mention: American Council of the Blind, Association on Handicapped Student Service Programs in Postsecondary Education, Association of Retarded Citizens, Epilepsy Foundation of America, Gallaudet University, National Head Injury Foundation, and the Spina Bifida Association.

Employment Priorities for the '90s for People with Disabilities

Executive Summary

In 1988 the Employment Preparation Committee of the President's Committee on Employment of People with Disabilities and the Arkansas Research and Training Center in Vocational Rehabilitation (University of Arkansas) initiated a project entitled "National Agenda for the Employment of People with Disabilities." The purpose of the project was to involve people with disabilities in the development of employment policies and the improvement of rehabilitation services.

Major national advocacy groups listed in a directory published by the President's Committee were contacted to participate in the data collection process. The following organizations joined the project and encouraged their members to respond to the Employment Concerns Questionnaires: American Council of the Blind, Association on Handicapped Student Service Programs in Postsecondary Education, Association of Retarded Citizens, Epilepsy Foundation of America, Gallaudet University, National Head Injury Foundation, and the Spina Bifida Association.

The National Agenda Project was completed in three stages. In the first stage, data regarding employment concerns were gathered from consumers using the Concerns Report Method. Elements of the Concerns Report Method are (a) an item pool focusing on the topics of employment policies and rehabilitation practices, (b) an Employment Concerns Questionnaire which the organization creates from the item pool, and (c) a Concerns Report that identifies employment strengths and problems from the respondents' perspectives.

In the second phase of the Agenda project, consumers and professionals translated consumer perceptions into service and policy responses. During the third phase, the advocacy organizations developed organizational priorities and plans (agendas) that were responsive to the employment concerns of consumers and the recommendations of consumers and professionals.

Content analysis of data provided by the staff and constituents of participating organizations and rehabilitation professionals produced recommendations in four categories: employment preparation, placement, postemployment, and support systems. Suggested policy and practice changes are presented in the following list of employment priorities for the '90s for people with disabilities:

Career Preparation Recommendations

Recommendation 1

Train rehabilitation, educational, and medical professionals in client empowerment techniques, e.g., interpersonal skills.

Recommendation 2

Ensure that people with disabilities are the primary decision makers in their efforts to develop their medical, educational, and vocational plans.

Recommendation 3

Require that a specific vocational plan, including an occupational objective, be a part of the IEP.

Recommendation 4

Modify the vocational services of public schools so that they meet the needs of people with severe disabilities, e.g., career education, vocational evaluation, vocational/career counseling, vocational training, and cooperative work programs.

Recommendation 5

Prepare families to reinforce appropriate independence and autonomy in their children.

Recommendation 6

Increase incentives (tax credits) for employer involvement in the design and delivery of community-based vocational training, on-the-job education, and student employment (mentoring experiences, internships, and part-time work).

Recommendation 7

Promote the recruitment of students with disabilities by colleges and universities.

Recommendation 8

Increase the meaningful involvement of people with disabilities in the development of IWRP objectives.

Recommendation 9

Improve public school and rehabilitation vocational/career counseling services for women with disabilities who have potential for a wide range of careers.

Recommendation 10

Increase the availability of financial aid to qualified students with disabilities.

Placement Recommendations

Recommendation 11

Add a quality dimension to the "closed 26" criterion in rehabilitation, i.e., closed in a position commensurate with the person's training and experience that offers a minimally acceptable level of fringe benefits.

Recommendation 12

Counter employer stereotypes and discrimination via educational programs, voluntary employment initiatives and goals, public information campaigns, and enforcement of

employment protections in the Americans with Disabilities Act and Sections 501-504 of the Rehabilitation Act.

Recommendation 13

Fund tax incentive programs for targeted recruitment programs and employment subsidies that benefit people with disabilities.

Recommendation 14

Support community-based placement programs (job clubs) that teach people how to manage and maintain their own job searches.

Recommendation 15

Prepare rehabilitation counselors to serve as technical advisors to employers regarding legal requirements, job modifications, and technology utilization.

Postemployment Recommendations

Recommendation 16

Improve disability management services offered by employers and employee assistance programs so that more people with disabilities return to work.

Recommendation 17

Ensure on-going support at the worksite on an as-needed basis, e.g., consultation and financial support regarding use of technology, career development counseling, job coaching, and peer support groups.

Support Systems Recommendations

Recommendation 18

Promote and communicate work or independence incentives in Social Security provisions, i.e., increase allowable levels of earned income; offer housing, medical, and transportation incentives conditional upon continuing employment, etc.

Recommendation 19

Support legislation to offer improved health insurance coverage through public or private means to people with disabilities who wish to return to work, who are not insured at the workplace, or who are currently underinsured.

Recommendation 20

Enforce ADA regulations requiring access to public services and reasonable accommodations at the worksite for people with disabilities.

Employment Priorities for the '90s for People with Disabilities

As the last decade of the twentieth century opens, American society must renew its commitment to empowerment and employment of people with disabilities. In some cases, changes are needed in the very nature of employment policies and practices. In other cases, stronger support of existing rehabilitation policies and practices is needed. Based on feedback from people with disabilities, this report describes strategies for preserving strengths and remediating problems in vocational programs and services.

The extent of the employment problem for people with disabilities is evident in recent statistics. In a random sample of 1,000 people with disabilities, 66% of the respondents were unemployed (Louis Harris, 1986). Given that approximately 35 million Americans have disabilities severe enough to interfere with their ability to work (Elkind, 1990; National Council on Disability, 1986), the projected total number of unemployed people with disabilities represents a staggering loss of human potential and productivity.

Survey data (Louis Harris, 1986) also support the need to re-examine employment programming for people with disabilities. Only one out of ten people with disabilities in the survey reported any contact with vocational rehabilitation agencies. Moreover, 56% of the respondents who had experience with rehabilitation agencies reported some dissatisfaction with the help they received in their search for jobs.

The focus on employment is appropriate; employment contributes to the independence and self-esteem of people with disabilities in several ways. In interviews with people with severe disabilities, Hill, Mehnert, and Lederer (1987) found that respondents who were employed were less likely to consider themselves disabled. Studies involving people with a variety of physical and emotional disabilities document a positive correlation between subjective quality of life and variables such as employment status, weekly wage, and hours worked per week (Lehman, 1983; Lehman, Ward, & Linn, 1982; Kirchman, 1986; Ramund & Stensman, 1988).

Finally, the fact that people with disabilities want to work should not be overlooked. In the Harris survey (Louis Harris, 1986), 66% of the working age people who were not employed said they wanted a job. As Murphy (1988) reported in a qualitative study of rehabilitation outcomes, clients and counselors agree on one essential point: Employment is the "sine qua non" of the rehabilitation process.

High unemployment rates and the importance of work to people with disabilities underscore the need to set new goals and to improve employment-related policies and practices. Vachon (Report on Disability Programs, 1990, p. 190) proposed two appropriate targets for the '90s: "A goal for employment ... would be to reduce the unemployment level among employable disabled people to the national average while a goal for economic well-being would be to reduce poverty among that group to the national average."

The remainder of this report is devoted to a discussion of strategies for achieving Vachon's employment and economic goals. Initially, employment concerns are presented from the perspective of a wide variety of people with disabilities. Their concerns represent operational goals that can be achieved only by strengthening and changing employment policies and practices. The recommendations presented in the report are derived from input of consumers and professionals and findings in the rehabilitation literature.

Method

The Concerns Report Method was used to gather data from large groups of people with disabilities regarding their opinions of employment policies and practices. People with a variety of disabling conditions participated in the study.

Participants

Demographic characteristics of people with disabilities participating in the national project are described in Table 1. Over 3,500 consumers representing seven organizations and a variety of disabilities reported their employment concerns. Most of the participants were unemployed or enrolled full-time in postsecondary education. The total sample was approximately equally divided between men (54%) and women (46%).

Constituting convenience samples of constituents from each of the organizations, the participants may not be representative of all people with disabilities. By the same token, large numbers of people with disabilities expressed the employment concerns in the report, and the specific strategies recommended have broad applicability.

Procedure

In 1988 the Employment Preparation Committee (President's Committee on Employment of People with Disabilities) and the Arkansas Research and Training Center in Vocational Rehabilitation (University of Arkansas) initiated a project entitled the "National Agenda for the Employment of People with Disabilities." The purpose of the project was to enable people with disabilities to have a greater impact on the development of disability policies and the improvement of rehabilitation services. Major national advocacy organizations listed in a directory published by the President's Committee were contacted to participate in the data collection process.

The National Agenda Project consisted of three phases. In the first phase, data regarding employment concerns were gathered from consumers using the Concerns Report Method described below. The second phase involved consumers and professionals in translating consumer perceptions into service and policy responses. During the third phase, the advocacy organizations developed organizational priorities and plans (agendas) that were responsive to the concerns of consumers and the recommendations of consumers and professionals.

The Concerns Report Method

The Concerns Report Method was used to collect data regarding the employment concerns of people with disabilities. Because of its underlying citizen participation philosophy, the Concerns Report Method (Schriner & Fawcett, 1988a; 1988b) differs from more traditional needs assessment and survey techniques. Traditional needs assessments rely heavily on service providers, researchers, or other experts to specify, not only what will be judged, but how judgments will be made (Marti-Costa & Serrano-Garcia, 1983). In the Concerns Report Method, respondents not only register their opinions regarding important items but help to select the very items to which they will respond.

Table 1

Demographic Characteristics of People with Disabilities Participating in the Agenda Project

Organization	Sex		Avg.	Race			Emp. Status		Onset of Disability	Educational Level
	M	F	Age	W	B	Other	Unemp.	Emp.		
American Council of the Blind (n=76)	59%	41%	44	86%	4%	11%	43%	57%	47% at birth; 10% by 3 yrs.	17% h.s. grad; 36% some coll. or coll. grad.; 33% postgrad.; 6% trade/ voc/tech.
Association of Handicapped Student Service Programs in Postsecondary Education (n=1448)	48%	52%	29	84%	5%	11%	--	--	25% congenital; 29% preadol.; 17% adol. or youth	All respondents were college or university students
Association for Retarded Citizens (n=78)	70%	30%	32	Not available			48% supported employment; 32% competitive employment		Not available	Not available
Epilepsy Foundation of America (n=178)	52%	48%	33	78%	17%	5%	71%	29%	8% congenital; 31% preadol.; 37% adol.; 24% between 20-49 years	13% some h.s.; 24% h.s. grad.; 37% some coll. or coll. grad.; 6% postgrad.; 20% trade/voc/tech
Gallaudet University (n=601)	49%	51%	23	84%	8%	8%	--	--	67% at birth; 23% before 6 yrs.	All respondents were students at Gallaudet Univ.
National Head Injury Foundation (n=1052)	66%	34%	34	95%	2%	3%	70%	30%	59% between 10-29 yrs.; 84% before 39 yrs.; avg. age of onset, 27 yrs.	73% h.s. grad.; 49% some coll.; 23% coll. grad.
Spina Bifida Association of America (n=221)	37%	63%	24	97%	1%	2%	48%	52%	Spina bifida is a congenital condition	20% h.s. grad.; 52% some coll. or coll. grad.; 12% postgrad.; 12% trade/voc/tech.

Previous research demonstrates that the Concerns Report Method is a reliable and valid tool for identifying strengths and problems from the perspective of neighborhood residents (Schriner & Fawcett, 1988b). The method has been used to develop agendas for clients of human service agencies (Seekins & Fawcett, 1987), patients and staff in psychiatric institutions (Fawcett et al., 1982), and people with disabilities (Roessler, Schriner, & Troxell, 1990; Roessler, Schriner, & Price, in press; Schriner & Roessler, 1990; Schriner, Roessler, & Johnson, in press).

Elements of the Concerns Report Method are (a) an employment concerns index (item pool) used by the consumer organization to develop a unique questionnaire; (b) an employment concerns questionnaire, which the organization creates, that includes items for importance and satisfaction ratings; and (c) a concerns report identifying strengths and problems of respondents. The employment concerns index consists of 100 items that integrate core human values such as security, justice, self-esteem, and freedom in statements related to employment. For example, one item, "You have access to training for jobs that are in high demand," relates the concept of security to job training.

The second element, the Employment Concerns Questionnaire, results from the activities of a working group comprised of consumers, family members, and professionals in rehabilitation and education. The working group reviews the 100 items in the concerns index and selects 30 items for the questionnaire. They may choose items exactly as they are written in the item pool, edit items, or create entirely new items that better reflect their employment concerns. The final questionnaire also includes an employment expectation item -- "You can get and keep a good job."

Item selection occurred via the working group strategy for all groups except the Association of Retarded Citizens. ARC personnel and project staff conducted personal interviews with employed people with mental retardation in order to develop appropriate items for the Employment Concerns Questionnaire.

Most respondents used a five-point scale to rate each employment concern along two dimensions, importance and satisfaction. For example, the item "You have access to career counseling" is rated first on importance to the respondent (1 = not important, 5 = very important) and then on satisfaction (1 = not satisfied, 5 = very satisfied). The five-point rating was not used for two groups, people with mental retardation and people with head injuries. Given the cognitive limitations imposed by head injuries and mental retardation, a "Yes/No" answer format was used for both the importance and satisfaction ratings.

After analyzing the questionnaire data, the Arkansas Research and Training Center provided participating organizations with an Employment Concerns Report that presented consumer responses in two ways. First, mean importance and satisfaction ratings (transformed from a 1 to 5 to a 0 to 100 scale) for each questionnaire item were reported except for ARC and NHIF data. Importance and satisfaction scores for ARC and NHIF items reflected the percent of respondents indicating "yes" on the two dimensions.

By calculating the relationship between importance and satisfaction scores, researchers identified top priority employment strengths and problems from the perspectives of consumers. Employment strengths were items with high importance and satisfaction scores relative to the group distribution, and problems were items with high importance and low satisfaction scores relative to the group distribution.

In the Results section of this report, data are presented in terms of the clusters of strengths and problems reported by each of the participating groups. The Discussion focuses on

strategies that would preserve strengths and remediate problems, thereby contributing to improved employment outcomes of people with disabilities.

To generate alternative policy and practice solutions, project staff discussed the concerns report results with consumers, rehabilitation professionals, researchers, educators, and organizational representatives. Listed in Table 2, these data interpretation sessions concentrated on two topics: (a) strategies for preserving strengths, and (b) strategies for solving problems. Participants discussed the meaning of the strengths and weaknesses, suggested alternative service and policy recommendations, and evaluated the quality of resulting strategies. Strategies in this report were derived from proposals by consumers and professionals and recommendations in the rehabilitation literature (Roessler & Schriner, 1991).

In the final phase of the research, professional staff of several advocacy organizations and project staff met to review the Concerns Report and feedback from consumers and professionals. The purpose of these meetings was to consider items for an employment agenda that would direct the national organization's efforts in the coming months. Organizational agendas specify the procedures required to accomplish employment initiatives on a national level.

Results

The issues considered by consumers to be either employment strengths or problems are presented in four tables. Information is included from people with visual disabilities (American Council of the Blind - ACB), college students with disabilities (Association on Handicapped Student Service Programs in Postsecondary Education - AH), people with mental retardation (Association of Retarded Citizens - ARC), people with epilepsy (Epilepsy Foundation of America - EFA), college students at Gallaudet with deafness or hearing impairments (Gallaudet University -G), people with head injuries (National Head Injury Foundation -NHIF), and people with spina bifida (Spina Bifida Association - SBA). Each table addresses a specific topic, e.g., preparation, placement, postemployment, or support systems.

Preparation

Employment preparation concerns encompass practices and policies that enable people with disabilities to acquire the knowledge, self-image, and training needed to succeed in the job market. Items viewed by respondents as employment preparation strengths or problems are presented in Table 3. References are made to public school programs, college level training, and specific vocational training.

Content analysis of Table 3 reveals the important employment preparation items for people with disabilities. Respondents endorsed many empowerment-related items, e.g., treated with respect, encouraged to take control, encouraged to develop skills, confident in potential to work, recognized for vocational potential, and equal partners in planning vocational rehabilitation services. They also stressed the importance of specific vocational training, i.e., training modified to meet the needs of people with different types of severe disabilities, that prepares people for jobs that are available in the local community.

Vocational preparation for entry level jobs is only the first step. As Table 3 priorities indicate, people with disabilities also want to be well-trained for a career. Career development is enhanced by appropriate career counseling, additional on-the-job training, and higher education. Access to regular college classes, aids and services, and financial assistance are necessities for people who have college potential.

Table 2

Organizational Input Sessions

Organization	Date/Place	Audience
President's Committee	5/10/89, Washington DC	Consumers/Professionals
Society for Disability Studies	6/22/89, Denver	Consumers/Scholars
AH/G	8/11/89, Seattle	Professionals
EFA	9/13/89, Memphis	Professionals
EFA	1/26/90, Washington DC	National Staff
President's Committee	5/3/90, Washington DC	Consumers/Professionals
NHIF	6/4/90, Washington DC	Consumers/Professionals
SBA	6/20/90, Memphis	Consumers
AH/G	8/3/90, Nashville	Professionals
National Employability Conference	9/3/90, Little Rock	Professionals
Empowerment and Employment Conference	10/3/90, Long Island	Professionals
NHIF	11/15/90, New Orleans	Consumers/Professionals
President's Committee	5/23/91, Dallas	Consumers/Professionals
ACB	6/28/91, Tampa	Consumers/Professionals
National Rehabilitation Association	11/16/91, Louisville	Professionals

Note:
American Council of the Blind - ACB
Association on Handicapped Student Service Programs in Postsecondary Education - AH
Association of Retarded Citizens - ARC
Epilepsy Foundation of America - EFA
Gallaudet University - G
National Head Injury Foundation - NHIF
Spina Bifida Association - SBA

Table 3

Employment Preparation Strengths and Problems
Reported by People with Disabilities

Issues		Strengths	Problems
1.	Have skills for jobs paying more than minimum wage.	ACB	
2.	Access to adequate information about careers.		ACB
3.	Treated with respect by professionals and service providers.	EFA, NHIF	
4.	Encouraged to take control of their lives.	EFA,SBA,G	
5.	Encouraged to develop all of their skills.	EFA, NHIF	
6.	Lack of access to training for advancement.		EFA
7.	Inadequate career exploration experiences in the public schools.		EFA
8.	Confident in your own potential to work.	SBA	
9.	Equal partners in planning VR services.		SBA
10.	Have your needs considered in the design of job training programs.		SBA, NHIF, ACB
11.	Access to appropriate career counseling by a professional knowledgeable about head injuries.		NHIF
12.	Vocational preparation needs are met.		NHIF
13.	Recognized for your vocational potential.		NHIF

Note:
American Council of the Blind - ACB
Association on Handicapped Student Service Programs in Postsecondary Education - AH
Association of Retarded Citizens - ARC
Epilepsy Foundation of America - EFA
Gallaudet University - G
National Head Injury Foundation - NHIF
Spina Bifida Association - SBA

Table 3 (continued)

Issues		Strengths	Problems
14.	Access to job training related to local opportunities.		NHIF
15.	Access to regular education courses.	AH	
16.	Receiving same benefits from education as nondisabled students.	AH	
17.	Access to necessary aids and services.	AH	
18.	Well trained for a career.		AH, G
19.	Can get help with the costs of college.		AH, G
20.	Easy access to campus and campus buildings.	G	
21.	Encouraged to stay in school.	G	
22.	Encouraged to have confidence in your future.	G	
23.	Encouraged to prepare for a wide range of jobs.		G
24.	Helped to select a career that is appropriate for you.		G

Note:
American Council of the Blind - ACB
Association on Handicapped Student Service Programs in Postsecondary Education - AH
Association of Retarded Citizens - ARC
Epilepsy Foundation of America - EFA
Gallaudet University - G
National Head Injury Foundation - NHIF
Spina Bifida Association - SBA

Placement

Placement concerns of people with disabilities are presented in Table 4. Four areas are addressed in the specific strengths and problems: empowerment, professional expertise, preparation for job seeking, and employment discrimination.

Consistent with entries in Table 3, several of the placement concerns pertain to empowerment. Treating people with respect, encouraging them to return to work, and expecting them to do well on the job are empowering attitudes and expectations that rehabilitation professionals convey.

Placement professionals must, however, do more than convey empowering attitudes and expectations. They must also be technically proficient. People with disabilities place great value on access to quality placement assistance that helps them find and keep good jobs. A "good job" is defined, in part, as one for which the person is prepared, i.e., consistent with the level of the person's training. Competitive wage/salary rates, fringe benefits, and advancement opportunities are other criteria of a "good job." To increase access to available "good jobs," placement professionals must be knowledgeable about ways to accommodate people with disabilities at the work site.

Two other concerns are mentioned in Table 4, job seeking skills training and employment discrimination. On the one hand, people with disabilities consider training in job seeking skills as an important aspect of rehabilitation services. On the other hand, they are concerned that they receive fair consideration by employers once they are in the job market.

Postemployment

Table 5 presents the postemployment concerns of respondents. Specific mention is made of conditions of employment, job retention, and job advancement.

Conditions of employment are affected by on-the-job interpersonal relationships, production demands, and quality of fringe benefits. In the interpersonal realm, people with disabilities wish to work side-by-side with workers without disabilities, be treated with respect by supervisors and co-workers, be treated like other employees, and socialize with co-workers during free time.

Being treated like other employees encompasses concerns about fringe benefits. People with disabilities stress the importance of receiving the same benefits as other workers, i.e., comparable pay for comparable work, paid vacation time, equivalent choice in scheduling work hours, and paid sick leave.

People with disabilities are interested not only in retaining quality employment but also in advancing on the job. Retention and advancement are encouraged by personnel policies that enable people with disabilities to change jobs when their disabilities interfere with performance of certain duties or to receive financial support to purchase needed assistive devices. In addition, support while on-the-job is needed from both the family and rehabilitation professionals if people with disabilities are to maintain and advance on their jobs. Job advancement is the final concern included in Table 5.

Table 4

Placement Strengths and Problems
Reported by People with Disabilities

Issues		Strengths	Problems
1.	Access to good placement assistance.	EFA	ACB
2.	Help in developing job seeking skills.	EFA	G, ACB
3.	Getting and keeping a good job.	G, ACB	EFA, AH
4.	Fair treatment as a job applicant.		EFA, SBA
5.	Help in finding employment for which you are prepared.		SBA
6.	Help in finding a job.	ARC	
7.	The people who have helped you with your job treat you with respect.	ARC	
8.	Access to appropriate placement assistance by a professional knowledgeable about head injuries.		NHIF
9.	Expected to do well on the job.	ARC	
10.	Encouragement to return to work after an injury or illness.	EFA	

Note:
American Council of the Blind - ACB
Association on Handicapped Student Service Programs in Postsecondary Education - AH
Association of Retarded Citizens - ARC
Epilepsy Foundation of America - EFA
Gallaudet University - G
National Head Injury Foundation - NHIF
Spina Bifida Association - SBA

Table 5

Postemployment Strengths and Problems
Reported by People with Disabilities

Issues		Strengths	Problems
1.	Help with costs of assistive devices.		ACB
2.	Inability to change jobs within a company due to disability.		EFA
3.	Receive same benefits at work as co-workers.	SBA	
4.	Work side-by-side with co-workers who do not have disabilities.	SBA	
5.	Receive same pay as would a person without a disability.	SBA	
6.	Your supervisor treats you with respect.	ARC	
7.	You get along well with your co-workers.	ARC	
8.	You are treated like other employees.	ARC	
9.	You get paid vacation time.		ARC
10.	Your family helps you keep your job.		ARC
11.	You have some choice in the hours you work.		ARC
12.	You can move up at work.		ARC
13.	You do things with your co-workers during your free time.		ARC
14.	You get paid even if you are off sick for the day.		ARC
15.	Receive long-term follow-up services needed to maintain employment.		NHIF

Note:
American Council of the Blind - ACB
Association on Handicapped Student Service Programs in Postsecondary Education - AH
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Epilepsy Foundation of America - EFA
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Support Systems

Although the broad categories of preparation, placement, and postemployment subsume most of the concerns in the data, they do not address several important support systems (see Table 6). People with disabilities need up-to-date information about Social Security programs and provisions. Furthermore, many people are concerned that their needs are not considered when Social Security regulations are developed and implemented.

Table 6

Support System Strengths and Problems
Reported by People with Disabilities

Issues		Strengths	Problems
Social Security Eligibility and Benefits			
1.	Access to information about Social Security programs.	ACB	EFA
2.	Needs are considered in the development and implementation of Social Security regulations.		AH
Health Insurance			
1.	Access to adequate health insurance.	ACB	EFA, SBA, AH
Related Issues			
1.	Transportation to and from work.	EFA, NHIF	

Note:
American Council of the Blind - ACB
Association on Handicapped Student Service Programs in Postsecondary Education - AH
Association of Retarded Citizens - ARC
Epilepsy Foundation of America - EFA
Gallaudet University - G
National Head Injury Foundation - NHIF
Spina Bifida Association - SBA

Respondents stressed the importance of two other types of support systems, health insurance and transportation. The unavailability of comprehensive health insurance is a major concern for many people with severe disabilities who are interested in working. They must also have access to reliable transportation to and from work. Given the fact that many NHIF and EFA respondents were unemployed at the time of the survey, they may not have fully tested the adequacy of their transportation resources. Reliable transportation on a daily basis to get to work is considerably different from occasional transportation for medical and rehabilitation service needs.

Discussion

The entries in Tables 3-6 clarify the priorities and values of many people with a variety of severe disabilities. They also suggest the need to reexamine a variety of rehabilitation practices and policies in the following four categories: preparation, placement, postemployment, and support systems.

Preparation

A recent Rehabilitation Brief (PSI, International, 1990) provides pertinent suggestions for promoting the empowerment of people with disabilities via counseling and other professional services. Counselors who demonstrate interpersonal skills such as empathy, respect, genuineness, and concreteness manifest in their statements and actions an empowerment orientation (Akridge, Means, Milligan, Farley, 1978). They respect the consumer's point of view regarding vocational preparation needs and are willing to explore the feasibility of different strategies for achieving those goals. They describe their roles and resources in easily understood (concrete) terms. Most of all, they reinforce the worth and value of the individual and convey positive expectations regarding the person's potential for vocational success.

Counselors are also urged to guard against preconceptions that occur as the result of reading case files before meeting the person involved. By meeting the person first, then reading the files, the counselor can avoid stereotyped thinking and form an impression that incorporates more of the available data (PSI, International, 1990).

Members of other helping professions must empower people with disabilities as well. Medical personnel and educators can treat people with disabilities as decision makers who have the right to develop their own educational, medical, and vocational plans. Parents can learn child rearing techniques that facilitate the development of children and youth with disabilities, i.e., reinforcing self-care and independence on the part of very young children, identifying and changing parenting assumptions that promote dependency, stating expectations for a child's success in new activities, and providing opportunities to develop and practice new skills (National Information Center for Children and Youth with Handicaps, 1990).

Public education programs must improve their vocational preparation services for people with disabilities. Several authors have recommended the following:

1. Increase career education, cooperative work, and mentoring programs in high school (Drake & Witten, 1986; Herr & Long, 1987).
2. Increase parent involvement in career education and transition planning (President's Committee, 1987).
3. Improve school-to-work transition services (Louis Harris & Associates, 1987).
4. Improve vocational evaluation, planning, training, and counseling services in high school (Roessler, Schriner, & Troxell, 1990; Wehman & Moon, 1987).
5. Increase high school counselors' involvement in post-secondary transition planning (Storey, 1987).
6. Increase career counseling services at the college level for students with disabilities (Fichten, Amsel, Bourdon, & Creti, 1988; Frank, Karst, & Boles, 1989; Schriner & Roessler, 1990).
7. Include a specific vocational plan and goal in the IEP (Wehman & Moon, 1987).

Requiring that the IEP include plans to achieve the transition and employment objectives of students would encourage adoption of other recommendations in the list, e.g., the implementation of career education; improvement of vocational evaluation, counseling, and training services; and creation of new job training programs.

Many recommendations are germane to the issue of improving job/career preparation. Consumers, professionals, and researchers have recommended the following:

1. Increase employer involvement in the design and delivery of vocational training (Ford Foundation, 1983).
2. Increase business sponsorship of on-site education, student internships, and part-time student jobs (Louis Harris & Associates, 1987).
3. Increase collaboration among school, rehabilitation, and business personnel in designing job training programs compatible both with the needs of people with severe disabilities and community employers (McCarthy, 1986).
4. Increase college recruitment efforts with qualified secondary students with disabilities (President's Committee, 1987).
5. Expand the IWRP to include vocational, social, and residential goals (Kiernan, Sanchez, & Schalock, 1989).
6. Introduce women with disabilities to a wider variety of nontraditional careers (Johnson & Rubin, 1986; Britt, 1988).
7. Increase the rehabilitation counselor's role in employment advocacy (Kiernan, et al., 1989).
8. Strengthen the business/rehabilitation partnership through Business Advisory Councils (Borgen, Amundson, & Biela, 1987).
9. Develop national policies supporting wider access for adults to basic educational and work skills and specialty and technical training (Ford Foundation, 1983).
10. Create tax credits and loan programs to help with college costs (Borgen, et al., 1987).
11. Increase the availability of financial aid information to college students with disabilities (Schriner & Roessler, 1990).
12. Enhance the development of the work personality and the work ethic among people with disabilities (Roessler, Schriner, & Troxell, 1990).

Given the current worker shortage in the United States, the private sector is interested in innovative preparation strategies that increase the number of qualified job applicants (Hudson Institute, 1987; Newitt, 1984). A worker shortage may even promote more creative vocational counseling, e.g., helping women with disabilities prepare for a variety of nontraditional careers.

Tax credit incentives for on-the-job training encourage employers to implement educational programs in their own companies and to establish working relationships with other community vocational training programs. As a result, employment preparation opportunities increase such as cross training, job coaching, and mentoring. Tax credits given directly to people with severe disabilities for college expenses are another means of increasing participation in higher education. Availability of students with disabilities who have the funds to attend college should encourage higher education personnel to communicate opportunities to qualified high school students with disabilities and provide academic and career advising services after enrollment.

Placement

Empowering people with disabilities during the placement process requires the rehabilitation counselor to: (a) respect the rights of people with disabilities to make their

own vocational choices, (b) communicate expectations that people with disabilities can succeed in work, (c) teach people with disabilities the skills needed to manage their own job searches, and (d) help people with disabilities maintain their job searches until they have secured quality employment. Consumers define quality placements as jobs commensurate with their training and experience. In fact, some people with disabilities have suggested that the rehabilitation closure criterion be changed from simply "closed employed" to "closed in a position commensurate with the person's training and experience" (Schriner et al., in press).

Placement is, however, not solely the responsibility of the person with a disability. Counselors must demonstrate creativity and initiative in the placement process as manifested by the use of a variety of job development and employer education strategies. Recommended strategies include:

1. Increase the exchange of information about job-ready people with disabilities among employers, public school personnel, rehabilitation counselors, and vocational school representatives (Louis Harris & Associates, 1987).
2. Increase targeted hiring programs such as McJobs and Better Days Job Fairs (Bowe, 1984; Brown & Roessler, in press; Koch, 1989).
3. Improve the job seeking and self-marketing skills of people with disabilities (Louis Harris & Associates, 1987).
4. Increase rehabilitation counselor involvement in technical assistance with employers (Louis Harris & Associates, 1987).
5. Increase financial support for community-based job seeking support groups (Roessler, Schriner, & Troxell, 1990).
6. Continue tax credit programs for employers who hire people with disabilities and who make site and job accommodations (Louis Harris & Associates, 1987).
7. Institute tax credit programs for unemployed people with disabilities who find and keep a job (Bishop & Kang, 1988).
8. Increase state-wide coalitions promoting employment for people with disabilities involving state chapters of advocacy organizations, Governors' Committees, and independent living centers (Schriner et al, in press).
9. Inform people with disabilities about technical assistance and financial resources pertinent to technology and job modification needs, e.g., the Job Accommodation Network of America and ABLEDATA (ILRU, 1986; Schriner et al., in press).

Although people with disabilities can counter employer discrimination through knowledge of their employment rights and use of self-marketing skills, they will also benefit from counselor efforts in this arena. Counselors may do the following to decrease employer discrimination:

1. Encourage employers to maintain safeguards against discrimination in hiring such as employment initiatives and voluntary hiring goals (Louis Harris & Associates, 1987).
2. Teach people with disabilities self-advocacy skills (Atkins et al., 1987).
3. Conduct public information campaigns promoting the positive employment records and employment rights of people with disabilities (Atkins et al., 1987).
4. Demonstrate to employers that most job modifications are minor in scope and cost (Hill, Mehnert, & Lederer, 1987).
5. Promote enforcement of existing and future nondiscrimination regulations, e.g., the Americans with Disabilities Act and Sections 501-504 of the 1973 Rehabilitation Act (Atkins et al. 1987; Louis Harris & Associates, 1987).

Postemployment

Postemployment topics in Table 5 included working conditions, fringe benefits, job retention, and job advancement. Work life quality would be significantly improved if the following recommendations were implemented:

1. Encourage employers to improve fringe benefit packages for entry level workers (William T. Grant Foundation, 1988).
2. Negotiate for fringe benefits as part of supported employment contracts with employers (Kiernan & Schalock, 1989).
3. Incorporate job quality (fringe benefits) comparisons into the IWRP (Roessler, Schriner, & Troxell, 1990).
4. Promote legislation requiring a minimum fringe benefit package for entry level workers (Wehman & Moon, 1987).

Ongoing support (retention and advancement) at the worksite via employee assistance programs, supported employment, or counselor involvement is another important concern of people with disabilities in the Agenda project. Support activities hold many benefits for employers, e.g., retention of qualified employees, improved control of health care costs, and development of technology or strategies that benefit the entire work force. Recommended techniques for improving on-the-job support include:

1. Increase employer utilization of assistive technology and job rotation, restructuring, modification, reassignment, and sharing strategies (Borgen, Amundson, & Biela, 1987).
2. Improve return-to-work options by increasing the flexibility in union seniority and advancement policies (Roessler, Schriner, & Troxell, 1990).
3. Increase on-the-job support for workers with disabilities through employee assistance programs (Kiernan & Schalock, 1989).
4. Increase family support (financial, psychological, medical management, child care, and transportation) for people with disabilities who are working (McCarthy, 1986).
5. Mandate on-the-job follow-up services, as needed, from rehabilitation and school personnel (Borgen et al., 1987; Edgar, 1988).
6. Implement supported employment strategies more widely for people with severe disabilities (Everson & Brooke, 1990; Kiernan & Schalock, 1989).
7. Create tax credits for employers who provide job coaching services (Roessler, Schriner, & Troxell, 1990).
8. Increase the availability of long-term peer support groups at the worksite (Borgen et al, 1987; Gade & Toutges, 1983).
9. Teach job retention skills to people with disabilities, i.e., how to deal with office politics, co-workers and supervisors, and task production demands (Roessler, Schriner, & Troxell, 1990).

Support Systems

The final three topics of concern mentioned by respondents -- Social Security, health insurance, and transportation -- were placed in the support systems category (exterio-self system; Livneh, 1988). Articles spanning at least a decade continue to stress the need for improved communication of Social Security regulations and benefits to people with disabilities (Hippolitus, Stevens, Meers, & Schwartz, 1979; Roessler, Schriner, & Troxell, 1990). Work incentives such as those in Sections 1619 a and b enable people with disabilities to maintain financial and medical benefits while employed. Other changes recommended include more gradual phasing out of benefits while the person is attempting

to return to work, i.e., increases in the levels of allowable income before Social Security medical and income benefits are reduced (Schriner & Roessler, 1990; Schriner et al., in press). Two important documents by the National Council on Disability (1986; 1988) are supportive of the above recommendations.

Policymakers could initiate needed changes in health insurance coverage through legislative action or financial subsidies. Requirement of a minimum health insurance program from employers with government financial assistance for people with severe disabilities would address the concerns of many people. Availability of the subsidies would provide an incentive for the private sector to develop new insurance plans for people with severe disabilities. Moreover, once they have secured insurance on the job, people with disabilities would be assured of continued coverage for 18 to 36 months, in some cases, even after they have stopped working (Epilepsy Foundation of America, 1987).

Availability of health insurance at the work place does not, however, address the needs of all people with disabilities. Other approaches are needed, such as health insurance pools established by the states, that will provide coverage for those who are not working. Limits should be placed on the cost of premiums allowed for this type of insurance.

As a result of provisions in the Americans with Disabilities Act, access to public transportation is mandated by law. But, employers and families can contribute to meeting the need for transportation through van services and carpools. Another means for improving public transportation involves requiring local jurisdictions to devote a certain percentage of federal dollars to development of accessible transportation (Schriner et al., in press).

Conclusions

In this paper, the employment concerns of a subset of people with disabilities have been reviewed, along with pertinent policy and practice recommendations. Of course, the "convenience" nature of the samples limits the generalizability of the findings. Nevertheless, implications of the agenda project data are worthy of consideration because they have the potential to improve the employment outcomes and quality of life for all people with disabilities.

Important employment agenda items for the '90s call for programs and policies that:

Career Preparation Recommendations

Recommendation 1

Train rehabilitation, educational, and medical professionals in client empowerment techniques, e.g., interpersonal skills.

Recommendation 2

Ensure that people with disabilities are the primary decision makers in their efforts to develop their medical, educational, and vocational plans.

Recommendation 3

Require that a specific vocational plan, including an occupational objective, be a part of the IEP.

Recommendation 4

Modify the vocational services of public schools so that they meet the needs of people with severe disabilities, e.g., career education, vocational evaluation, vocational/career counseling, vocational training, and cooperative work programs.

Recommendation 5

Prepare families to reinforce appropriate independence and autonomy in their children.

Recommendation 6

Increase incentives (tax credits) for employer involvement in the design and delivery of community-based vocational training, on-the-job education, and student employment (mentoring experiences, internships, and part-time work).

Recommendation 7

Promote the recruitment of students with disabilities by colleges and universities.

Recommendation 8

Increase the meaningful involvement of people with disabilities in the development of IWRP objectives.

Recommendation 9

Improve public school and rehabilitation vocational/career counseling services for women with disabilities who have potential for a wide range of careers.

Recommendation 10

Increase the availability of financial aid to qualified students with disabilities.

Placement Recommendations

Recommendation 11

Add a quality dimension to the "closed 26" criterion in rehabilitation, i.e., closed in a position commensurate with the person's training and experience that offers a minimally acceptable level of fringe benefits.

Recommendation 12

Counter employer stereotypes and discrimination via educational programs, voluntary employment initiatives and goals, public information campaigns, and enforcement of employment protections in the Americans with Disabilities Act and Sections 501-504 of the Rehabilitation Act.

Recommendation 13

Fund tax incentive programs for targeted recruitment programs and employment subsidies that benefit people with disabilities.

Recommendation 14

Support community-based placement programs (job clubs) that teach people how to manage and maintain their own job searches.

Recommendation 15

Prepare rehabilitation counselors to serve as technical advisors to employers regarding legal requirements, job modifications, and technology utilization.

Postemployment Recommendations

Recommendation 16

Improve disability management services offered by employers and employee assistance programs so that more people with disabilities return to work.

Recommendation 17

Ensure on-going support at the worksite on an as-needed basis, e.g., consultation and financial support regarding use of technology, career development counseling, job coaching, and peer support groups.

Support Systems Recommendations

Recommendation 18

Promote and communicate work or independence incentives in Social Security provisions, i.e., increase allowable levels of earned income; offer housing, medical, and transportation incentives conditional upon continuing employment, etc.

Recommendation 19

Support legislation to offer improved health insurance coverage through public or private means to people with disabilities who wish to return to work, who are not insured at the workplace, or who are currently underinsured.

Recommendation 20

Enforce ADA regulations requiring access to public services and reasonable accommodations at the worksite for people with disabilities.

References

Akridge, R., Means, B., Milligan, T., & Farley, R. (1978). Interpersonal Skills Training. Hot Springs: Arkansas Rehabilitation Research and Training Center.

Atkins, B., Dew, D., Esser, C., Hansen, G., Mundt, P., Scalia, V., Thornton, L., & Wesolek, J. (1987). Continuing issues, suggestions and recommendations. In W. Emener (Ed.), Public policy issues impacting the future of rehabilitation in America (pp. 151-185). Stillwater, OK: National Clearinghouse of Rehabilitation Training Materials.

Bishop, J., & Kang, S. (1988). Applying for entitlements: Employers and the Targeted Jobs Tax Credit (Working Paper #88-04). Ithaca, NY: Center for Advanced Human Resource Studies.

Borgen, W., Amundson, N., & Biela, P. (1987). Factors related to the acceptance of rehabilitation services by injured workers. Journal of Applied Rehabilitation Counseling, 18, 25-32.

Bowe, F. (1984). Employment trends: 1984 and beyond. Fayetteville: Arkansas Research and Training Center in Vocational Rehabilitation.

Britt, J. (1988). Psychosocial aspects of being female and disabled. Journal of Applied Rehabilitation Counseling, 19, 19-23.

Brown, P., & Roessler, R. (in press). A job fair demonstration for people with disabilities and senior citizens. Rehabilitation Counseling Bulletin.

Drake, G., & Witten, B. (1986). Facilitating learning disabled adolescents' successful transition from school to work. Journal of Applied Rehabilitation Counseling, 17(1), 34-37.

Edgar, E. (1988). Employment as an outcome for mildly handicapped students: Current status and future directions. Focus on Exceptional Children, 21(1), 1-8.

Elkind, J. (1990). The incidence of disabilities in the United States. Human Factors, 32, 397-405.

Epilepsy Foundation of America (1987). New law extends worker insurance. National Spokesman, 20(3), 6.

Everson, J., & Brooke, V. (1990). Training job coaches to serve employees with multiple and low-incidence disabilities: Implications for the 1990s. Rehabilitation Education, 4, 287-300.

Fawcett, S.B., Muiu, C., Seekins, T., Whang, P.L., Fletcher, R.K., & Hannah, G.T. (1982). A systematic method for identifying consumers' concerns about mental health institutions. Mental Health & Mental Retardation Quarterly Digest, 1(4), 1-4.

Fichten, C., Amsel, R., Bourdon, C., & Creti, L. (1988). Interaction between college students with disabilities and their professors. Journal of Rehabilitation, 19(1), 13-20.

Ford Foundation (1983). Not working: Unskilled youth and displaced adults. New York: Ford Foundation.

Frank, K., Karst, R., & Boles, L. (1989). After graduation: The quest for employment by disabled college graduates. Journal of Applied Rehabilitation Counseling, 20, 3-7.

Gade, E., & Toutges, G. (1983). Employers' attitudes toward hiring epileptics: Implications for job placement. Rehabilitation Counseling Bulletin, 26, 353-356.

Herr, E., & Long, T. (1987). Counseling youth for employability: Unleashing the potential. Ann Arbor, MI: ERIC Counseling and Personnel Services Clearinghouse.

Hill, N., Mehnert, T., & Lederer, E. (1987). The merits of hiring disabled persons. Business & Health, 4, 42-44.

Hippolitus, P., Stevens, M., Meers, G., & Schwartz, G. (1979). A blueprint for action. Washington, DC: President's Committee on Employment of People with Disabilities.

Hudson Institute (1987). Workforce 2000. Indianapolis: Author.

ILRU Newsletter (1986). ABLEDATA. ILRU Newsletter, 4(3), 6.

Johnson, S., & Rubin, S. (1986). Prediction of starting weekly salaries of rehabilitated severely disabled women. Journal of Applied Rehabilitation Counseling, 17, 39-41.

Kiernan, W., Sanchez, R., & Schalock, R. (1989). Economics, industry, and disability in the future. In W. Kiernan & R. Schalock, Economics, industry, and disability (pp. 365-374). Baltimore: Paul H. Brookes.

Kiernan, W., & Schalock, R. (1989). In Kiernan, W., & Schalock, R. (Eds.), Economics, industry, and disability (pp. i-v). Baltimore: Paul H. Brookes.

Kirchman, M. (1986). Measuring the quality of life. The Occupational Therapy Journal of Research, 6(1), 21-31.

Koch, J. (1989). Prime time redefined at Days Inn. Recruitment Today, 2(4), 36-37.

Lehman, A. (1983). The well-being of chronic mental patients. Archives of General Psychiatry, 40, 369-373.

Lehman, A., Ward, N., & Linn, L. (1982). Chronic mental patients: The quality of life issue. American Journal of Psychiatry, 139, 1271-1276.

Livneh, H. (1988). Rehabilitation goals: Their hierarchical and multifaceted nature. Journal of Applied Rehabilitation Counseling, 19(3), 12-18.

Louis Harris & Associates (1986). The ICD Survey of Disabled Americans: Bringing disabled Americans into the mainstream. New York: International Center for the Disabled.

Louis Harris & Associates (1987). The ICD Survey II: A nationwide survey of 920 employers. New York: International Center for the Disabled.

Marti-Costa, S., & Serrano-Garcia, I. (1983). Needs assessment and community development: An ideological perspective. Prevention in Human Services, 2, 75-88.

McCarthy, H. (1986). Making it in able-bodied America: Career development in young adults with physical disabilities. Journal of Applied Rehabilitation Counseling, 17, 30-38.

Murphy, S. (1988). Counselor and client views of vocational rehabilitation success and failure: A qualitative study. Rehabilitation Counseling Bulletin, 31, 185-197.

National Council on Disability (1986). Toward independence. Washington, DC: Author.

National Council on Disability (1988). Beyond independence. Washington, DC: Author.

National Information Center for Children and Youth with Handicaps (1990). Having a daughter with a disability: Is it different for girls. NICHCY News Digest, 14, 1-11.

Newitt, J. (1984). Selected implications of the U.S. demographic outlook. In D. Hardy (Ed.), Social services in the year 2000 (pp. 3-8). Washington, DC: Office of Human Development and Services.

President's Committee on Employment of the Handicapped (1987). Out of the job market: A national crisis. Washington, DC: Author.

PSI, International (1990). Rehab partners: Clients and counselors. Rehabilitation Brief, 13(4), 1-4.

Ramund, B., & Stensman, R. (1988). Quality of life and evaluation of functions among people with severely impaired mobility and non-disabled controls. Scandinavian Journal of Psychology, 29, 137-144.

Report on Disability Programs. (1990). Employment solutions. Report on Disability Programs, 13(24), 190-191.

Roessler, R., & Schriner, K. (1991). The implications of selected employment concerns for disability policy and rehabilitation practice. Rehabilitation Counseling Bulletin, 35(1), 52-67.

Roessler, R., Schriner, K., & Price, P. (in press). Employment concerns of people with head injuries. Journal of Rehabilitation.

Roessler, R., Schriner, K., & Troxell, J. (1990). Setting an employment agenda: A demonstration with the Epilepsy Foundation of America. Journal of Disability Policy Studies, 1(3), 37-51.

Schriner, K., & Fawcett, S. (1988a). Development and validation of a Community Concerns Report Method. Journal of Community Psychology, 16, 306-316.

Schriner, K., & Fawcett, S. (1988b). A Community Concerns Report Method for local agenda-setting. Journal of the Community Development Society, 19, 108-118.

Schriner, K., & Roessler, R. (1990). Employment concerns of college students with disabilities: Toward an agenda for policy and practice. Journal of College Student Development, 31, 307-312.

Schriner, K., Roessler, R., & Johnson, P. (in press). Employment concerns of people with spina bifida. Journal of Applied Rehabilitation Counseling.

Seekins, T., & Fawcett, S. (1987). Effects of a poverty-client's agenda on resource allocations by community decision makers. American Journal of Community Psychology, 15, 305-320.

Storey, K. (1987). Vocational options for persons with severe handicaps: Implications for counselors. Journal of Applied Rehabilitation Counseling, 18, 39-41.

Wehman, P., & Moon, S. (1987). Critical values in employment programs for persons with developmental disabilities: A position paper. Journal of Rehabilitation Counseling, 18(1), 12-16.

William T. Grant Foundation (1988). Pathways to success for America's youth and young families. Washington, DC: Author.

The President's Committee on Employment of People with Disabilities was established by President Truman in 1947. The Committee's purpose is to promote a positive climate of opinion in America leading to full acceptance of physically and mentally disabled people in the world of work, and to strive to mobilize the nation's resources, both public and private, to achieve this end. All achievements of the Committee are the result of combined efforts of some 600 voluntary organizations and community leaders from all segments of the American population. These members include representatives from civic organizations, veterans groups, the professions, and people with disabilities. The Chair of the Committee is Mr. Justin Dart and the Executive Director is Mr. Rick Douglas. The address of the President's Committee is 1331 F Street, N.W., Washington, D.C., 20004-1107 (202 376-6200, TTD 376-6205, Fax 376-6219).

The Arkansas Research and Training Center in Vocational Rehabilitation was established at the University of Arkansas in 1965. Funded through a grant from the National Institute on Disability and Rehabilitation Research, the Center has an extensive history in research and training in rehabilitation and disability-related issues. Currently, the Center is conducting research on employability assessment, return to work for mid-career disability onset, independent living and vocational programming, peer counseling and employment, and the employment preparation needs of youth and adults with disabilities. In addition, the Center serves as a host for the Institute on Rehabilitation Issues, a national study group that conducts and publishes a study on topics of national significance to the rehabilitation community. Rick Roessler and Kay Schriner, Senior Research Scientists, co-authored "Employment Priorities for the '90s for People with Disabilities." Their mailing address is 346 N. West Avenue, Fayetteville, AR, 72701.

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